Application or Docket Number

## PATENT APPLICATION FEE DETERMINATION RECORD AVAILABLE COPY Effective October 1, 2000

| CLAIMS AS FILED - PART I (Column 1) (Column 2)               |  |   |                            |                       |                              |                  | SMALL ENTITY TYPE                       |                        | OR | OTHER THAN<br>OR SMALL ENTITY |  |  |
|--|--|---|----------------------------|-----------------------|------------------------------|------------------|---|------------------------|----|-------------------------------|--|--|
| TOTAL CLAIMS   |  |   |                            |                       |                              |                  | RATE                                    | FEE                    |    | RATE                          | FEE  |  |
| FOR  |  |   | NUMBER FILED               |                       | NUMBER EXTRA                 |                  | BASIC FEE                               | 355.00                 | OR | BASIC FEE                     | 710.00   |  |
| TOTAL CHARGEABLE CLAIMS                                      |  |   | minus 20=                  |                       | *                            |                  | X\$ 9=                                  |                        | OR | X\$18=                        |  |  |
| INDEPENDENT CLAIMS   |  |   | )<br>Mir                   | nus 3 =               | •                            |                  | X40=                                    |                        | OR | X80=                          |  |  |
| MULTIPLE DEPENDENT CLAIM PR                                  |  |   | RESENT                     | •                     |                              |                  | +135=                                   |                        | OR | +270=                         | i  |  |
| * If the difference in column 1 is less than zero, enter     |  |   |                            |                       | r "0" in c                   | column 2         | TOTAL                                   |                        | OR | TOTAL                         | ПD   |  |
| CLAIMS AS AMENDED - PART II (Column 1) (Column 2) (Column 3) |  |   |                            |                       |                              | (Column 3)       | OTHER THAN SMALL ENTITY OR SMALL ENTITY |                        |    |                               |  |  |
| AMENDMENT A  |  | CLAIMS REMAINING AFTER AMENDMENT          |                            | HIGH<br>NUM<br>PREVIO | IEST<br>IBER<br>OUSLY        | PRESENT<br>EXTRA | RATE                                    | ADDI-<br>TIONAL<br>FEE |    | RATE                          | ADDI-<br>TIONAL<br>FEE                           |  |
|  | Total  | *   | Minus                      | **                    |                              | =                | X\$ 9=                                  | -                      | OR | X\$18=                        |  |  |
|  | Independent  | *   | Minus                      | ***                   |                              | =                | X40=                                    |                        | OR | X80=                          |  |  |
| L  | FIRST PRESE  | NTATION OF MI                             | JLTIPLE DEF                | PENDEN                | T CLAIM                      |                  | +135=                                   |                        | OR | +270=                         |  |  |
|  |  |   |                            |                       |                              |                  | TOTAL<br>ADDIT. FEE                     |                        | OR | TOTAL<br>ADDIT. FEE           |  |  |
| (Column 1) (Column 2) (Column 3)                             |  |   |                            |                       |                              |                  |   |                        |    | AUUII. FEE                    |  |  |
| AMENDMENT B  | u.   | CLAIMS<br>REMAINING<br>AFTER<br>AMENDMENT |                            | NUM<br>PREVI          | HEST<br>IBER<br>OUSLY<br>FOR | PRESENT<br>EXTRA | RATE                                    | ADDI-<br>TIONAL<br>FEE |    | RATE                          | ADDI-<br>TIONAL<br>FEE                           |  |
|  | Total  | *   | Minus                      | **                    |                              | =                | X\$ 9=                                  |                        | OR | X\$18=                        |  |  |
|  | Independent  | Independent * FIRST PRESENTATION OF MI    |                            | ***                   | T CL AIM                     | =                | X40=                                    |                        | OR | X80=                          |  |  |
| <u></u>  | rino i Phese   | INTATION OF WI                            | OLITPLE DEF                | ENDEN                 | CLAIN                        |                  | +135=                                   |                        | OR | +270=                         |  |  |
|  |  |   |                            |                       |                              |                  | TOTAL<br>ADDIT. FEE                     |                        | OR | TOTAL<br>ADDIT. FEE           |  |  |
|  |  | (Column 1)                                |                            |                       | mn 2)                        | (Column 3)       |   |                        |    |                               |  |  |
| AMENDMENT C  | als may be a wingle  | CLAIMS<br>REMAINING<br>AFTER<br>AMENDMENT | er a constant in the first | NUM<br>PREVI          | HEST<br>MBER<br>OUSLY<br>FOR | PRESENT<br>EXTRA | RATE                                    | ADDI-<br>TIONAL<br>FEE |    | RATE                          | ADDI-<br>TIONAL<br>FEE                           |  |
|  | Total  | •   | Minus                      | **                    |                              | =                | X\$ 9=                                  |                        | OR | X\$18=                        |  |  |
|  | Independent  | *   | Minus                      | ***                   |                              | =                | X40=                                    |                        | OR | X80=                          |  |  |
|  | FIRST PRESENTATION OF MULTIPLE DEPENDEN  |   |                            |                       | T CLAIN                      |                  |   |                        |    | <u> </u>                      | <del>                                     </del> |  |
| •  | If the entry in colu   | mn 1 is less than t                       | he entry in colu           | ımn 2, writ           | e "0" in co                  | olumn 3.         | +135=                                   |                        | OR | +270=                         |  |  |
| ***  | ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."  **If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."  The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1. |   |                            |                       |                              |                  |   |                        |    |                               |  |  |